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DECLARATION FOR UTILITY OR

Attorney Docket Number

DES	DESIGN			First Named Inventor Tom C. Xu			
PATENT APPLICATION (37 CFR 1.63)		COMPLETE IF KNOWN					
		Application Number					
Declaration Submitted OR with Initial Filing	Declaration	Filing Date	10/2	4/2001			
	Submitted after Initial Filing (surcharge	Art Unit					
	(37 ČFR 1.16 (e)) required)	Examiner Name	SAN CANADA				
As the below named inventor, I	hereby declare that:						
My residence, mailing address, an	d citizenship are as stated belo	w next to my name.					
I believe I am the original and first	inventor of the subject matter w	which is claimed and for whi	ch a patent is soug	tht on the invention entitled:			
Diagnostic Test Optica	al Eibor Tipo						
Diagnostic rest Optica	ai ribei Tips						
(Title of the Invention) the specification of which							
(Title of the Invention)							
•							
is attached hereto							
OR							
		as United States A	mmlination Niverboo	DOT Into an all and I			
L		as United States A	pplication Number	or PCT International			
was filed on (MM/DD/YYYY) Application Number							
Application Number	and was amende	ed on (MM/DD/YYYY)		(if applicable).			
		L		<u></u>			
I hereby state that I have reviewed any amendment specifically referre	and understand the contents of	f the above identified speci	fication, including t	he claims, as amended by			
			07.0ED 4 #0 : 1				
I acknowledge the duty to disclose applications, material information was interpolated and the continuous statements.	/hich became available betweer	n the filing date of the prior	application and the	iding for continuation-in-part e national or PCT			
international filing date of the continuity bene	fits under 35 U.S.C. 119(a)-(d)	or (f), or 365(b) of any fore	ion application(s)	for patent inventor's or plan			
breeder's rights certificate(s), or 30 States of America, listed below an	35(a) of any PCT international	application which designate	ted at least one o	ountry other than the United			
breeder's rights certificate(s), or a claimed.	ny PCT international application	on having a filing date bef	ore that of the ap	plication on which priority is			
Prior Foreign Application		Foreign Filing Date	Priority	Certified Copy Attached?			
Number(s)	Country	(MM/DD/YYYY)	Not Claimed	YES NO			
		mental priority data sheet F	TO (CD (OOD -#)				

[Page 1 of 2]

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PTO/SB/01 (10-01)

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Nu or Bar Code l	1	OR	Correspondence address below		
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Address					
Castro Valley		CA	94552		
City		State	ZIP		
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor					
Given Name Tom C. (first and middle [if any])		Family Name or Surname			
Inventor's Signature	<u> </u>		Date 10/24/01		
Castro Valley	CA	USA	USA		
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City	State	ZIP	Country		
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any]) Family Name or Surname					
inventor's Signature			Date		
Residence: City	State	Country	Citizenship		
Mailing Address					
City	State	ZIP	Country		
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					